



State of Wisconsin
2025 - 2026 LEGISLATURE

LRB-2917/1
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2025 SENATE BILL 251

May 9, 2025 - Introduced by Senators DASSLER-ALFHEIM, KEYESKI, DRAKE, HESSELBEIN, L. JOHNSON, LARSON, RATCLIFF, ROYS, SPREITZER and WIRCH, cosponsored by Representatives SNODGRASS, MAYADEV, MCCARVILLE, ANDERSON, ANDRACA, ARNEY, BARE, BROWN, CLANCY, DESMIDT, EMERSON, FITZGERALD, J. JACOBSON, JOERS, JOHNSON, MADISON, MIRESE, MOORE OMOKUNDE, NEUBAUER, ORTIZ-VELEZ, PALMERI, PHELPS, PRADO, ROE, SHEEHAN, SPAUDE, STROUD, STUBBS, SUBECK, TENORIO and UDELL. Referred to Committee on Health.

1 **AN ACT** *to create* 609.835 and 632.895 (16g) of the statutes; **relating to:** cost-
2 sharing caps on prescription drugs and medical supplies to treat asthma
3 under health insurance policies and plans.

Analysis by the Legislative Reference Bureau

This bill requires health insurance policies and plans that provide coverage of prescription drugs to cover prescription drugs and related medical supplies for the treatment of asthma. This bill provides that “related medical supplies” includes asthma inhalers and other medical supply items necessary to effectively and appropriately administer a prescription drug prescribed to treat asthma. This bill requires policies and plans to limit the amount of any enrollee cost-sharing for the coverage provided in the bill to no more than \$25 per one-month supply for each prescription drug prescribed to treat asthma and to no more than \$50 per month for all related medical supplies. Cost-sharing may not increase with the number of conditions for which an enrollee is treated. Further, the coverage provided in the bill may not be subject to any deductible. However, the bill provides that the limitations on cost-sharing and deductibles do not apply to the extent that the limitations would result in ineligibility for a health savings account under the federal Internal Revenue Code.

This proposal may contain a health insurance mandate requiring a social and financial impact report under s. 601.423, stats.

SENATE BILL 251**SECTION 1**

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1 **SECTION 1.** 609.835 of the statutes is created to read:

2 **609.835 Coverage of prescription drugs and medical supplies to treat**
3 **asthma.** Limited service health organizations, preferred provider plans, and
4 defined network plans are subject to s. 632.895 (16g).

5 **SECTION 2.** 632.895 (16g) of the statutes is created to read:

6 **632.895 (16g) COVERAGE OF PRESCRIPTION DRUGS AND MEDICAL SUPPLIES TO**
7 **TREAT ASTHMA.** (a) In this subsection, “related medical supplies” includes asthma
8 inhalers and other medical supply items necessary to effectively and appropriately
9 administer a prescription drug prescribed to treat asthma.

10 (b) Subject to par. (c), every disability insurance policy and every self-insured
11 health plan of the state or of a county, city, town, village, or school district that
12 provides coverage of prescription drugs shall cover prescription drugs and related
13 medical supplies for the treatment of asthma.

14 (c) A disability insurance policy or self-insured health plan of the state or of a
15 county, city, town, village, or school district to which par. (b) applies shall limit the
16 amount of any enrollee cost-sharing to no more than \$25 per one-month supply for
17 each prescription drug prescribed to treat asthma and to no more than \$50 per
18 month for all related medical supplies. The cost-sharing limitations under this
19 paragraph may not increase with the number of conditions for which an enrollee is
20 treated. Coverage under this subsection may not be subject to any deductible.

SENATE BILL 251**SECTION 2**

1 (d) If, under federal law, application of par. (c) would result in ineligibility for
2 a health savings account under section 223 of the Internal Revenue Code, par. (c)
3 shall apply to a health-savings-account-qualified high deductible health plan with
4 respect to the deductible of such a plan only after the enrollee has satisfied the
5 minimum deductible under section 223 of the Internal Revenue Code, except with
6 respect to items or services that are preventive care pursuant to section 223 (c) (2)
7 (C) of the Internal Revenue Code, in which case par. (c) shall apply regardless of
8 whether the minimum deductible under section 223 of the Internal Revenue Code
9 has been satisfied.

SECTION 3. Initial applicability.

10 (1) For policies and plans containing provisions inconsistent with this act, this
11 act first applies to policy or plan years beginning on the effective date of this
12 subsection, except as provided in sub. (2).
13

14 (2) For policies and plans that are affected by a collective bargaining
15 agreement containing provisions inconsistent with this act, this act first applies to
16 policy or plan years beginning on the effective date of this subsection or on the day
17 on which the collective bargaining agreement is newly established, extended,
18 modified, or renewed, whichever is later.

SECTION 4. Effective date.

19 (1) This act takes effect on the first day of the 4th month beginning after
20 publication.
21

22 (END)